

120000337009

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

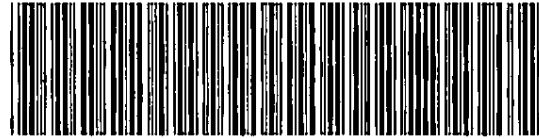
Special Instructions to Filing Officer:

Q. SILAS

APR 14 2022

4/11/22

Office Use Only



700381724287

02/14/22--01025--022 **35.00

FILED
2022 APR 11 PM 6:01
SECRETARY OF STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 APR 11 PM 12:33

SECRETARY OF STATE
TALLAHASSEE, FL

March 22, 2022

DANAY MADELINE OBREGON
12141 SW 193RD TERRACE
MIAMI, FL 33177

SUBJECT: THE DISCOUNT HOUSE LLC
Ref. Number: L20000337009

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

The current name of the entity is as referenced above. Please correct your document accordingly.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Silas
Regulatory Specialist II

Letter Number: 622A00006688

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Discount house LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Danay Madeline Obregon
Name of Person

Firm/Company

12141 SW 193rd terrace
Address

Miami FL, 33177
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Danay Obregon at (786) 479 8401
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

The Discount House LLC

(Name of the Limited Liability Company as it now appears on our records
(A Florida Limited Liability Company))

2022 APR 11 PM 6:01

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 10/23/20 and assigned
Florida document number 120000337009.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ZMS Towing and Recovery LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

15901 SW 288 Street +
Homestead FL 33033

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

15901 SW 288 Street +
Homestead FL, 33033

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Zachary M Sanderson

New Registered Office Address:

15901 SW 288th Street +

Enter Florida street address

Homestead

City

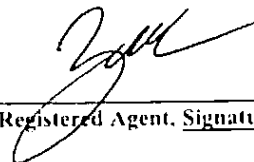
Florida

33033

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



If Changing Registered Agent, Signature of New Registered Agent

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

This Limited liability company is organized
ARe: - TO Engage in the business of Towing
and Recovery.

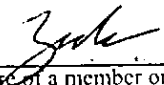
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

CDated: ☒ March 28th 2022



Signature of a member or authorized representative of a member

Zachary M. Sanders

Typed or printed name of signee